

County: Outagamie
 AFFINITY SUBACUTE CARE
 1506 SOUTH ONEIDA STREET
 APPLETON 54915 Phone: (920) 831-8340

Facility ID: P210

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Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? Yes
 Number of Beds Set Up and Staffed (12/31/01): 20
 Total Licensed Bed Capacity (12/31/01): 20
 Number of Residents on 12/31/01: 16

Ownership: Nonprofit Church
 Highest Level License: Skilled
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? No
 Average Daily Census: 13

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)			
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	100.0		
Home Health Care	No					1 - 4 Years	0.0		
Supp. Home Care-Personal Care	No					More Than 4 Years	0.0		
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	12.5				
Day Services	No	Mental Illness (Org./Psy)	0.0	65 - 74	18.8				
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	56.3				100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	6.3	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	6.3	Full-Time Equivalent			
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	18.8		100.0	(12/31/01)			
Other Meals	No	Cardiovascular	12.5	65 & Over	87.5				
Transportation	No	Cerebrovascular	6.3			RNs	61.0		
Referral Service	No	Diabetes	0.0	Sex	%	LPNs	0.0		
Other Services	No	Respiratory	12.5			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	50.0	Male	43.8	Aides, & Orderlies			
Mentally Ill	No			Female	56.3				44.1
Provide Day Programming for			100.0						
Developmentally Disabled	No				100.0				

Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other		Private Pay			Family Care		Managed Care			Total Resi- dents	% Of All	
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)
Int. Skilled Care	6	40.0	327	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	1	100.0	878	7	43.8
Skilled Care	9	60.0	313	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	9	56.3
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	15	100.0		0	0.0		0	0.0		0.0		0	0.0		1	100.0		16	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent			
Private Home/With Home Health	0.4	Bathing	0.0	81.3	18.8	16
Other Nursing Homes	0.0	Dressing	6.3	75.0	18.8	16
Acute Care Hospitals	97.5	Transferring	6.3	75.0	18.8	16
Psych. Hosp. -MR/DD Facilities	0.2	Toilet Use	6.3	75.0	18.8	16
Rehabilitation Hospitals	1.7	Eating	6.3	75.0	18.8	16
Other Locations	0.2	*****				
Total Number of Admissions	481	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	18.8	Receiving Respiratory Care		12.5
Private Home/No Home Health	33.1	Occ/Freq. Incontinent of Bladder	18.8	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	29.7	Occ/Freq. Incontinent of Bowel	31.3	Receiving Suctioning		0.0
Other Nursing Homes	12.1			Receiving Ostomy Care		0.0
Acute Care Hospitals	11.0	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets		25.0
Rehabilitation Hospitals	1.5					
Other Locations	7.6	Skin Care		Other Resident Characteristics		
Deaths	5.1	With Pressure Sores	12.5	Have Advance Directives		31.3
Total Number of Discharges		With Rashes	6.3	Medications		
(Including Deaths)	472			Receiving Psychoactive Drugs		25.0

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

	This Facility	Other Hospital-Based Facilities		All Facilities	
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	65.0	88.1	0.74	84.6	0.77
Current Residents from In-County	75.0	83.9	0.89	77.0	0.97
Admissions from In-County, Still Residing	2.5	14.8	0.17	20.8	0.12
Admissions/Average Daily Census	3700.0	202.6	18.26	128.9	28.70
Discharges/Average Daily Census	3630.8	203.2	17.87	130.0	27.92
Discharges To Private Residence/Average Daily Census	2276.9	106.2	21.44	52.8	43.16
Residents Receiving Skilled Care	100.0	92.9	1.08	85.3	1.17
Residents Aged 65 and Older	87.5	91.2	0.96	87.5	1.00
Title 19 (Medicaid) Funded Residents	0.0	66.3	0.00	68.7	0.00
Private Pay Funded Residents	0.0	22.9	0.00	22.0	0.00
Developmentally Disabled Residents	0.0	1.6	0.00	7.6	0.00
Mentally Ill Residents	0.0	31.3	0.00	33.8	0.00
General Medical Service Residents	50.0	20.4	2.45	19.4	2.58
Impaired ADL (Mean) *	57.5	49.9	1.15	49.3	1.17
Psychological Problems	25.0	53.6	0.47	51.9	0.48
Nursing Care Required (Mean) *	7.0	7.9	0.89	7.3	0.96